

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR  
 Subject Matter:: UTILITY  
 CD-ROM or CD-R?: NONE  
 Title:: LITHIUM ION CAPACITOR  
 Attorney Docket Number:: 288630US0PCT  
 Total Drawing Sheets:: 1

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
 Primary Citizenship Country:: Japan  
 Status:: FULL CAPACITY  
 Given Name:: Kohei  
 Family Name:: MATSUI  
 City of Residence:: Shinjuku-ku  
 State or Province of Residence:: Tokyo  
 Country of Residence:: Japan  
 Street of Mailing Address:: c/o Fuji Jukogyo Kabushiki Kaisha, 1-7-2,  
 Nishi-shinjuku  
 City of Mailing Address:: Shinjuku-ku  
 State or Province of Mailing Address:: Tokyo  
 Country of Mailing Address:: Japan  
 Postal or Zip Code of Mailing Address:: 160-8316

Applicant Authority Type:: INVENTOR  
 Primary Citizenship Country:: Japan  
 Status:: FULL CAPACITY  
 Given Name:: Risa  
 Family Name:: TAKAHATA  
 City of Residence:: Shinjuku-ku  
 State or Province of Residence:: Tokyo  
 Country of Residence:: Japan  
 Street of Mailing Address:: c/o Fuji Jukogyo Kabushiki Kaisha, 1-7-2,  
 Nishi-shinjuku  
 City of Mailing Address:: Shinjuku-ku  
 State or Province of Mailing Address:: Tokyo  
 Country of Mailing Address:: Japan  
 Postal or Zip Code of Mailing Address:: 160-8316

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Nobuo  
Family Name:: ANDO  
City of Residence:: Shinjuku-ku  
State or Province of Residence:: Tokyo  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Fuji Jukogyo Kabushiki Kaisha, 1-7-2,  
Nishi-shinjuku  
City of Mailing Address:: Shinjuku-ku  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 160-8316

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Atsuro  
Family Name:: SHIRAKAMI  
City of Residence:: Shinjuku-ku  
State or Province of Residence:: Tokyo  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Fuji Jukogyo Kabushiki Kaisha, 1-7-2,  
Nishi-shinjuku  
City of Mailing Address:: Shinjuku-ku  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 160-8316

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Shinichi  
Family Name:: TASAKI  
City of Residence:: Shinjuku-ku  
State or Province of Residence:: Tokyo  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Fuji Jukogyo Kabushiki Kaisha, 1-7-2,  
Nishi-shinjuku  
City of Mailing Address:: Shinjuku-ku  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 160-8316

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Yukinori  
Family Name:: HATO  
City of Residence:: Shinjuku-ku  
State or Province of Residence:: Tokyo  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Fuji Jukogyo Kabushiki Kaisha, 1-7-2,  
Nishi-shinjuku  
City of Mailing Address:: Shinjuku-ku  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 160-8316

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP05/19908	10/28/05

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2005-104727	Japan	03/31/05	YES

#### ASSIGNMENT INFORMATION

Assignee Name:: FUJI JUKOGYO KABUSHIKI KAISHA  
 Street of Mailing Address:: 1-7-2 Nishishinjuku, Shinjuku-ku  
 City of Mailing Address:: Tokyo  
 Country of Mailing Address:: Japan  
 Postal or Zip Code of Mailing Address:: 160-8316